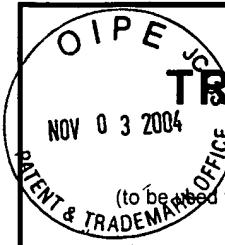


Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



04
**TRANSMITTAL
FORM**

~~(to be used for all correspondence after initial filing)~~

 TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>		Application Number 10/708,529 Filing Date March 10, 2004 First Named Inventor James Bumgardner Art Unit 2611 Examiner Name Not yet known
Total Number of Pages in This Submission <input type="text" value="1"/>		Attorney Docket Number PD 1326.01 US

ENCLOSURES *(check all that apply)*

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	 <u>Cover Letter,</u> <u>and Certificate of First Class</u> <u>Mail dated 11/1/04.</u>
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	 <u>Remarks</u>	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

Discovision Associates - Intellectual Property Department

Signature

Printed name **Micah P. Goldsmith**

Date

November 1, 2004

111

11. *What is the name of the author of the book you are reading?*

I here

Verify that this correspondence

ed to the USPTO or deposited

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature

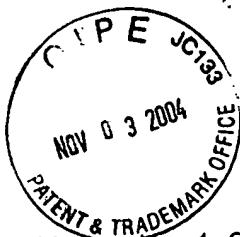
Ellen A. Brothers

Typed or printed name **Calleen A. Smothers**

Date

November 1, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



November 1, 2004

VIA FIRST CLASS MAIL

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

CUSTOMER NUMBER

30439

PATENT TRADEMARK OFFICE

RE: U. S. Patent Application Serial No.: 10/708,529
Title: RESOURCE SHARING SYSTEM OF SET-TOP BOXES
Filed: March 10, 2004
Confirmation No.: 2528
Inventors: James Bumgardner, et al.
Our Docket No.: PD 1326.01 US

Dear Sir or Madam:

Enclosed for filing in the above-referenced application are the following documents:

1. Transmittal Form (1 page);
2. Communication – IDS under 37 CFR 1.97 (2 pages);
3. 1449 and 4 References (141 pages);
4. Cover Letter (Document Control Number: 74E093); and
5. Certificate of First Class Mail dated November 1, 2004.

Please acknowledge receipt of this transmittal.

Very truly yours,

DISCOVISION ASSOCIATES

Micah P. Goldsmith, Reg. No. 43,638
Patent Prosecution Attorney
INTELLECTUAL PROPERTY DEVELOPMENT

Enclosures

MG:cs

P:\VABG\PPD\PDT\1326\01\placvr_01.doc

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8	
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450	
on:	11/1/04
Calleen A. Smothers (Type or print name)	
(Signature)	



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the Application of:

James Bumgardner, et al.

Application No.: 10/708,529

Filed: March 10, 2004

For: RESOURCE SHARING SYSTEM
OF SET-TOP BOXES

Examiner: Not yet known

Art Unit: 2611

Confirmation No.: 2528

Docket No.: PD 1326.01 US

INFORMATION DISCLOSURE STATEMENT
UNDER 37 C.F.R. § 1.97Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8	
<i>I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450</i>	
on: <u>11/1/04</u>	<u>Celeen A. Smothers</u> (Type or print name)
<u>Callie A. Smothers</u> (Signature)	

In complying with the duty of disclosure set forth in 37 CFR §1.56, Applicant submits copies of patents and publications as listed on the attached form PTO-1449.

Applicant kindly requests that the Examiner review these references and enter as a matter of record herein. Applicant further requests that a signed, initialed copy of the Form PTO-1449 be returned to Applicant's mailing address.

The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 04-1175.

Respectfully submitted,

DISCOVISION ASSOCIATES



Date: November 1, 2004

Micah P. Goldsmith
Reg. No. 43,638

DISCOVISION ASSOCIATES
INTELLECTUAL PROPERTY DEVELOPMENT
P.O. Box 19616
Irvine, California 92623
(949) 660-5000

P:\VABG\PPD\PDT\1326\01\ids.com.doc

Form PTO-1449 (Modified)	U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE	ATTY. DOCKET NO. PD 1326.01 US	SERIAL NO. 10/708,529
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use several sheets if necessary)		APPLICANT James Bumgardner, et al.	
(37 CFR 1.98(b))		FILING DATE March 10, 2004	GROUP 2611



U.S. PATENT DOCUMENTS

EXAMINER INITIAL		PATENT NUMBER	ISSUE DATE	PATENTEE	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
	AA						
	AB						
	AC						

FOREIGN PATENT OR PUBLISHED FOREIGN PATENT APPLICATION

EXAMINER INITIAL		DOCUMENT NUMBER	PUBLICATION DATE	COUNTRY OR PATENT OFFICE	CLASS	SUBCLASS	TRANSLATION YES	NO
	F01	P2004-23326A	1/22/2004	JP			X	
	F02	11-136615	5/21/1999	JP			X	
	F03	11-313280	11/9/1999	JP			X	
	F04	P2004-7592A	1/8/2004	JP			X	

OTHER DOCUMENTS (Including Author, Title, Date**, Relevant Pages, Place of Publication***)

P01	
-----	--

AUTHORIZATION TO CHARGE APPLICANT'S DEPOSIT
ACCOUNT FOR ENTRY OF THESE REFERENCES HAS
BEEN GIVEN IN THE STATEMENT SUBMITTED HEREWITH

EXAMINER	DATE CONSIDERED
----------	-----------------

EXAMINER: Initial citation considered. Draw line through citation of not in conformance and not considered. Include copy of this form with next communication to applicant.